

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 600358	RECEIPT DATE:	07 / 14 / 00
IA NUMBER: PCT/	CA99 / 00038	IA FILING DATE:	01 / 18 / 99
FAMILY NAME:	ROIFMAN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	CHAIM M	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	01 / 16 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	3477-88	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER: 000000	TELEPHONE	0000000000
		FAX	

NAME: KAREN A MAGGI

STREET: PO BOX 37428

CITY: RALEIGH

STATE/COUNTRY: NC ZIP: 27627

EMAIL:

APPLICATION TITLES:

HUMAN LYMPHOID PROTEIN IN TYROSINE PHOSPHATASES

TAB TO LAST POSITION,PUSH SEND